Instructions: Applicants are encouraged to apply online at https://vacos.useclarus.com/.

- If you are unable to apply online, complete this form and mail this application with a cashier's check, money order, or credit card payment for the full amount of the examination fee, payable to PSI Services LLC at the address listed above.
- Any applicant who does not pass a reexamination within one year of the initial examination date shall be required to submit a new application and new examination fee.

Select one examination type you are requesting:

<table>
<thead>
<tr>
<th>Examination Type</th>
<th>Fee</th>
<th>Examination Type</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barber - Practical &amp; Theory Exam</td>
<td>$172.00</td>
<td>Master Barber - Practical &amp; Theory Exam</td>
<td>$172.00</td>
</tr>
<tr>
<td>Barber - Practical Exam</td>
<td>$86.00</td>
<td>Master Barber - Practical Exam</td>
<td>$86.00</td>
</tr>
<tr>
<td>Barber - Theory Exam</td>
<td>$86.00</td>
<td>Master Barber - Theory Exam</td>
<td>$86.00</td>
</tr>
<tr>
<td>Instructor Exam</td>
<td>$86.00</td>
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</tr>
</tbody>
</table>

1. Full Legal Name (As it appears on your government issued ID or other legal documentation.)

   Last (required) First (required) Middle Generation

2. Provide at least one of the following identification numbers*:

   - Social Security Number and/or Virginia DMV Control Number

   - Enter the same identification number as used on examination, previous applications or licenses on file with the department.

   * State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

3. Date of Birth

4. Maiden or Former Name(s)

5. Mailing Address (PO Box accepted)

   The mailing address will be printed on the license.

   City State Zip Code

6. Street Address (PO Box not accepted)

   PHYSICAL ADDRESS REQUIRED

   City State Zip Code

7. Contact Numbers

   Primary Telephone Alternate Telephone Fax

8. Email Address

   Email address is considered a public record and will be disclosed upon request from a third party.
9. Are you re-applying to take the **Barber, Master Barber** or **Barber Instructor** examination?
   - No □
   - Yes □

   If yes, provide your previous examination information:
   - Barber/Master Exam
   - Practical Exam
   - Theory Exam
   - Barber Instructor Exam

   Month/Year taken: ______________________

10. Have you been previously licensed in Virginia as a practitioner or instructor in the fields of **Barber, Master Barber, Cosmetology, Nail Technician, or Wax Technician**?
   - No □
   - Yes □

   If yes, provide your license number and expiration date below:
   - VA License Number ____________
   - Expiration Date ____________

11. Are you applying for the **Barber** or **Barber Instructor** examination?
   - No □
   - Yes □

   If yes, which method are you using to qualify for the examination? Select only **ONE**.
   - If no, skip to question #12.

   - Completion of an approved barber training program in a Virginia licensed barber school or a Virginia public school barber program approved by the Virginia Department of Education
     - **Required Documentation:** Attach a completed TRAINING VERIFICATION FORM

   - Completion of a barber training which is substantially equivalent to the Virginia program (at least 80% of Virginia's required hours) that is obtained outside the Commonwealth of Virginia, but within the United States and its territories
     - **Required Documentation:** Attach a diploma or official school transcript indicating successful completion of a substantially equivalent training program or written verification from the Licensing Board in the state where the training was received.

   - Completion of a barber course (consisting of less than 80% of training hours required in Virginia) and five years of barber work experience
     - **Required Documentation:** Attach a certificate, diploma or other documentation verifying successful completion of the barber course and a completed Barber & Cosmetology - Experience Verification Form documenting at least five years of barber work experience

   - Completion of the Virginia apprenticeship program in barbering
     - **Required Documentation:** A completed Department of Labor and Industry form available from your apprenticeship representative

   - **Virginia licensed cosmetologist** with a minimum of two years of work experience
     - VA License Number ____________
     - Expiration Date ____________
     - **Required Documentation:** Attach a completed Barber & Cosmetology - Experience Verification Form

   - Barber training obtained in any Virginia state institution
     - **Required Documentation:** Attach a completed TRAINING VERIFICATION FORM

   - Two years of barbering experience in the United States armed forces
     - **Required Documentation:** Contact the Board for further instructions

   - Applying to take the Instructor examination, provide **Virginia** license number
     - VA License Number ____________
     - Expiration Date ____________

   - Previously licensed in Virginia by examination and past the reinstatement period.
     - **Required Documentation:** Verification from the Virginia Board for Barbers and Cosmetology.

   - Endorsement applicant required to complete Virginia examination.
     - **Required Documentation:** Verification from the Virginia Board for Barbers and Cosmetology.
12. Are you applying for the Master Barber examination?

No ☐
Yes ☐ If yes, which method are you using to qualify for the examination? Select only ONE.

☐ Completion of an approved master barber training program from an approved Virginia licensed barber school
   
   Required Documentation: Attach a completed Training Verification Form

☐ Completion of an approved barber training or a dual barber/master barber training program in a Virginia licensed barber school or a Virginia public school barber program approved by the Virginia Department of Education
   
   Required Documentation: Attach a completed Training Verification Form

☐ Completion of a master barber training which is substantially equivalent to the Virginia program (at least 80% of Virginia's required hours) that is obtained outside the Commonwealth of Virginia, but within the United States and its territories
   
   Required Documentation: Attach a diploma or official school transcript indicating successful completion of 1500 hours of instruction or written verification from the Licensing Board in the state where the 1500 hours of training were received

☐ Completion of substantially equivalent master barber course (consisting of less than 80% of training hours required in Virginia) and five years of master barber work experience
   
   Required Documentation: Attach a certificate, diploma or other documentation verifying successful completion of the master barber course and a completed Barber & Cosmetology - Experience Verification Form, documenting at least five years of master barber work experience

☐ Completion of the Virginia apprenticeship program in master barbering
   
   Required Documentation: A completed Department of Labor and Industry form available from your apprenticeship representative

☐ Virginia licensed cosmetologist with a minimum of two years of work experience

   VA License Number ___________________________ Expiration Date ________________

   Required Documentation: Attach a completed Barber & Cosmetology - Experience Verification Form

☐ Master Barber training obtained in any Virginia state institution
   
   Required Documentation: Attach a completed Training Verification Form

☐ Two years of master barbering experience in the United States armed forces
   
   Required Documentation: Contact the Board for further instructions

☐ Previously licensed in Virginia by examination and past the reinstatement period.
   
   Required Documentation: Verification from the Virginia Board for Barbers and Cosmetology.

☐ Endorsement applicant required to complete Virginia examination.
   
   Required Documentation: Verification from the Virginia Board for Barbers and Cosmetology.
13. Do you hold a current or have you ever held a **Barber, Master Barber, Cosmetology, Nail Technician, or Wax Technician** license, certification or registration issued by any state or territory of the United States (excluding Virginia)?

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<tbody>
<tr>
<td>No</td>
<td></td>
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<tr>
<td>Yes</td>
<td>If yes, complete the following questions.</td>
</tr>
</tbody>
</table>

**A.** List the following state/jurisdiction where a license, certification or registration has been issued:

<table>
<thead>
<tr>
<th>State/Jurisdiction</th>
<th>License, Certification or Registration Number</th>
<th>Expiration Date</th>
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<tbody>
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**B.** Are you in good standing as a licensed, certified, or registered professional for the states/jurisdictions listed above?

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<tbody>
<tr>
<td>Yes</td>
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<tr>
<td>No</td>
<td>If <strong>no</strong>, provide an original Certification of Licensure (dated within the last 60 days) from each state/jurisdiction where you are <strong>not</strong> in good standing.</td>
</tr>
</tbody>
</table>

- Certifications of Licensure, prepared by the state board or regulatory body must include: 1) the license/certification/registration number; 2) the initial date of licensure; 3) the expiration date of the license; 4) the means of obtaining licensure (i.e. exam, reciprocity, etc.) and the minimum requirement that were met to qualify for licensure; and 5) all closed disciplinary actions resulting in a violation or undetermined finding. Certification must be mailed directly to:
  
  **Board for Barbers and Cosmetology, 9960 Mayland Drive, Suite 400, Richmond, VA 23233-1485**

14. Have you ever been subject to a **disciplinary action** taken by any (including Virginia) local, state or national regulatory body? This includes but is not limited to any monetary penalties, fines, suspensions, revocations, surrender of a license in connection with a disciplinary action or voluntary termination of a license.

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<tbody>
<tr>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>If yes, complete the <strong>Disciplinary Action Reporting Form</strong>.</td>
</tr>
</tbody>
</table>

15. Have you ever had an application for licensure, certification or registration as a practitioner or instructor in the fields of barbering, cosmetology, waxing, nail care, esthetics, body-piercing, or tattooing **denied** by any (including Virginia) local, state or national regulatory body?

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<tbody>
<tr>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>If yes, complete the <strong>Denial of Licensure Reporting Form</strong>.</td>
</tr>
</tbody>
</table>

16. **A.** Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony** within the last 20 years?

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<tbody>
<tr>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>If yes, complete the <strong>Criminal Conviction Reporting Form</strong>.</td>
</tr>
</tbody>
</table>

**B.** Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **misdemeanor** involving moral turpitude, sexual offense, non-marijuana drug distribution or physical injury within the last two (2) years?

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<tbody>
<tr>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>If yes, complete the <strong>Criminal Conviction Reporting Form</strong>.</td>
</tr>
</tbody>
</table>
17. Are you applying for a temporary permit? **DOES NOT APPLY TO STUDENT INSTRUCTOR TEMPORARY PERMITS.**

   No ☐
   Yes ☐ If yes, your sponsor must complete and sign the following sponsorship statement:

   I, the undersigned, agree to supervise all activities related to the practice of barbering for the named applicant, and shall be responsible for his/her barber activities during the time the temporary permit is in force.

   ________________________________
   Printed Name of Sponsor

   ________________________________
   Signature of Sponsor

   Sponsor's Virginia Barber's License No.

18. By signing this application, I certify the following statements:

   • I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.

   • I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).

   • I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.

   • I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.

   • I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 7, of the Code of Virginia and the Virginia Board for Barbers and Cosmetology Regulations.

   ________________________________
   Signature

   ______________
   Date

19. Attach a professional passport compliant 2" x 2" color photo taken within the last 6 months to reflect your current appearance. It must meet the following requirements:

   ➔ sized so that your head is approximately 1 inch from the bottom of the chin to the top of the head

   ➔ taken in front of a plain white background

   ➔ be a full-face view, directly facing the camera with a neutral facial expression

   Attach Photo Here.

   Photocopy pictures are not permitted.